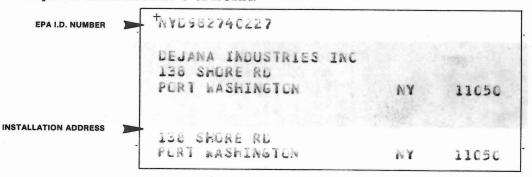


ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12B (4-80)

05/22/89

Form Approved. OMB No. 2050-0028. Expires 9-30-88. GSA No. 0246-EPA-OT

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A. Name of Installation's Legal Owner													B. Type of Ownership (enter co												
Type of B	a	n	9	ata	H-	n	CA	4	3	7	<u>ا</u>	1	e	2		A-	n	<u>C</u>		THE RESERVE THE PARTY OF THE PA	A STATE OF THE PARTY OF THE PAR	-6			
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1a. Generat				-	Ser		UKUS.	1.00	00 kg	/mo.			6.0)ff-Sr	ecific	catio	n Us	ed Oi	I Fue					terri	
□ 1a. Generator □ 1b. Less than 1,000 kg/mo. □ 2. Transporter									6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)																
3. Treater/Storer/Disposer									☐ a. Generator Marketing to Burner																
 □ 4. Underground Injection □ 5. Market or Burn Hazardous Waste Fuel 									☐ b. Other Marketer																
(enter 'X' and mark appropriate boxes below)												. Bur													
☐ a. Generator Marketing to Burner ☐ b. Other Marketer									7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification																
□ c. Bt		arket	er									SH-Se							31/95						
I. Waste Fu	el Bu	rnin	g: T	ype	of (Com	bus	tior	De	vice	(ent	er'X'	in al	appr	opria	te bo	xes t	o ind	icate	type	of coi	mbus	tion	device	e(s) ii
nich hazardous	waste	fuel	or of	-spe	citica	ation	used	oil f	uel is	burn	ed. S	ee in	stru	ctions	for c	lefin	itions	of c	ombu	istion	devi	ices.)			
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			ID — For Official Use Only								
			v		T/A C						
X. Description of Haza	ardous Wastes (co	entinued from front)		Santage							
A. Hazardous Wastes from from nonspecific sources	Nonspecific Sources.	Enter the four-digit nun	nber from 40 CFR Part	261.31 for each listed ha	azardous waste						
1 1 1	your motamation name	les. Use additional sneet									
		3	4	5	6						
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7	8	9	10	11	12						
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B. Hazardous Wastes from	Specific Sources. Ente	er the four-digit number	from 40 CFR Part 261.	32 for each listed hazar	dous waste from						
specific sources your inst	allation handles. Use a	additional sheets if neces	ssary.		dous wasts from						
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Commercial Chemical Pr	oduct Hazardous Was	stes. Enter the four-digit	number from 40 CFR F	Part 261.33 for each che	emical substance						
your installation handles v	which may be a hazard	ous waste. Use addition	al sheets if necessary.								
31	32	33	34	35	36						
	E - Francisco Contractor										
37	38	39	40	41	42						
		<u>/**</u>									
43	44	45	46	47	48						
000 000 000 000 000					26 24 21 31						
Listed Infectious Wastes.	Enter the four-digit nu	umber from 40 CFR Part	261.34 for each hazard	dous waste from hospita	als, veterinary hos-						
pitals, or medical and rese	earch laboratories your	installation handles. Us	e additional sheets if no	ecessary.	zan karaman an						
49	50	51	52	53	54						
				1991年 1991年 1991年	5. 原 法 医						
Characteristics of Nonlist	ed Hazardous Wastes	. Mark 'X' in the boxes of	orresponding to the cha	aracteristics of nonlistee	d hazardous wastes						
your installation handles. (See 40 CFR Parts 261.	21 — 261.24)									
1. Ignitable (D001)		2. Corrosive	☐ 3. Reactiv	e	4. Toxic						
I. Certification	WALLEY TO THE PARTY OF	(D002)	(D003)		(D000)						
I certify under penal	ty of law that I hav	o norconally ovami	ned and am familia	s with the informat	tion outpoitted in						
this and all attached	documents, and t	that based on my in	quiry of those indi-	viduals immediatel	v responsible for						
obtaining the informa	ation, I believe that	the submitted infor	mation is true, acco	urate, and complete	. I am aware that						
there are significant	perialties for subm										
gnature		Name and Office	al Title (type or print)	Pate	Signed						
on do	~	Purch	ph Noccio	from May 4	130/87						
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